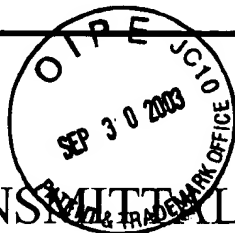


10-01-03

1645

Express Mail Mailing Label No. EL954151502US

**TRANSMITTAL
FORM**



Application Serial Number	09/423,905
Filing Date	March 19, 1999
First Named Inventor	Tani <i>et al.</i>
Group Art Unit	1645
Examiner Name	P. Duffy, Ph.D.
Attorney Docket No.	FJN-077
Patent No.	Not applicable
Issue Date	Not applicable

RECEIVED

OCT 09 2003

TECH CENTER 1600/2900

ENCLOSURES (check all that apply)

- | | | |
|---|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form
<input checked="" type="checkbox"/> Check Attached
<input type="checkbox"/> Copy of Fee Transmittal Form
<input checked="" type="checkbox"/> Amendment/Response
<input type="checkbox"/> Preliminary
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]
<input checked="" type="checkbox"/> Petition for Extension of Time
<input type="checkbox"/> Information Disclosure Statement
<input type="checkbox"/> Form PTO-1449
<input type="checkbox"/> Copies of IDS Citations
<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Sequence Listing submission
<input type="checkbox"/> Paper Copy/CD
<input type="checkbox"/> Computer Readable Copy
<input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application
<input type="checkbox"/> Formal Drawing(s)
<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal
<input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)
<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application
<input type="checkbox"/> Small Entity Statement
<input type="checkbox"/> CD(s) for large table or computer program
<input type="checkbox"/> Amendment After Allowance
<input type="checkbox"/> Request for Certificate of Correction
<input type="checkbox"/> Certificate of Correction (in duplicate) | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences
<input type="checkbox"/> Appeal Brief (in triplicate)
<input type="checkbox"/> Status Inquiry
<input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8
<input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8
<input type="checkbox"/> Additional Enclosure(s) (please identify below) |
|---|---|--|

CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator
 Testa, Hurwitz & Thibault, LLP
 High Street Tower
 125 High Street
 Boston, MA 02110
 Tel. No.: (617) 248-7000
 Fax No.: (617) 248-7100

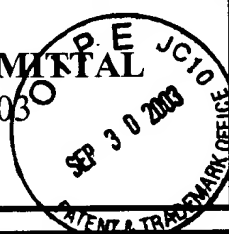
SIGNATURE BLOCK

Respectfully submitted,

 Brian Fairchild
 Agent for Applicant(s)
 Testa, Hurwitz & Thibault, LLP
 High Street Tower
 125 High Street
 Boston, MA 02110

Date: September 30, 2003
 Reg. No. 48,645
 Tel. No.: (617) 248-7697
 Fax No.: (617) 248-7100

FEE TRANSMITTAL
FY 2003



Complete if Known

Application Serial Number 09/423,905
Filing Date March 19, 1999
First Named Inventor Tani *et al.*
Group Art Unit 1645
Examiner Name P. Duffy, Ph.D.
Attorney Docket No. FJN-077

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METHOD OF PAYMENT

1. ☒ Payment Enclosed:
☒ Check ☐ Money Order ☐ Other
2. ☒ The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531.
☐ Required Fees (copy of this sheet enclosed).
☒ Additional fee required under 37 CFR 1.16 and 1.17.
☒ Overpayment Credit.
3. ☐ Applicant claims small entity status.

FEE CALCULATION

1. FILING FEE

Large Entity

Fee (\$)	Fee Description	Fee Paid
750	Utility filing fee	
330	Design filing fee	
160	Provisional filing fee	

Number Filed	Number Extra	Rate	Amount
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Total Claims - 20 = x \$ 18.00 =

Independent Claims - 3 = x \$ 84.00 =

☐ Multiple Dependent Claim(s), if any \$280.00 =

TOTAL:

SMALL ENTITY DISCOUNT:

SUBTOTAL (1) (\$) 0.00

2. AMENDMENT CLAIM FEES

Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid
Total 26	- 20 =	6	x \$ 18.00 =	108.00
Indep. 5	- 3 =	2	x \$ 84.00 =	168.00
<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$280.00 =	

TOTAL: (\$276.00)

SMALL ENTITY DISCOUNT: (\$)

SUBTOTAL (2) 276.00

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
130	65	Surcharge - late filing fee or oath	
50	25	Surcharge - late provisional filing fee or cover sheet	
130	130	Non-English specification	
2,520	2,520	Request for ex parte reexamination	
110	55	Extension for reply within first month	110.00
410	205	Extension for reply within second month	
930	465	Extension for reply within third month	
1450	725	Extension for reply within fourth month	
1970	985	Extension for reply within fifth month	
320	160	Notice of Appeal	
320	160	Filing a brief in support of an appeal	
280	140	Request for oral hearing	
130	130	Petitions to the Commissioner	
180	180	Submission of Information Disclosure Statement	
750	375	Filing a submission after final rejection (37 CFR 1.129(a))	
750	375	For each additional invention to be examined (37 CFR 1.129(b))	
100	100	Certificate of Correction for applicant's error	
110	55	Submission of Terminal Disclaimer	

Other fee (Specify)

Other fee (Specify)

SUBTOTAL (3) (\$) 110.00

SUBTOTAL (1) 0.00

SUBTOTAL (2) 276.00

SUBTOTAL (3) 110.00

TOTAL 386.00

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